

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000228859

**Entity Name:** FABFUN, LLC

**Current Principal Place of Business:**

5450 NW 82ND AVENUE  
DORAL, FL 33166

**Current Mailing Address:**

3252 NE 1ST AVENUE, SUITE 200  
MIAMI, FL 33137 US

**FEI Number:** 85-2532699

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FABRICANT & COMPANY, PA  
3252 NE 1ST AVENUE, SUITE 200  
MIAMI, FL 33137 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	FABRICANT, RACHEL	Name	MCADAMS, JAMES K
Address	3252 NE 1ST AVENUE, SUITE 200	Address	3252 NE 1ST AVENUE, SUITE 200
City-State-Zip:	MIAMI FL 33137	City-State-Zip:	MIAMI FL 33137

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** RACHEL FABRICANT

**MANAGER**

**04/25/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date